



Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** **180.00****Complete if Known**

Application Number	09/822,300
Filing Date	23 March 2001
First Named Inventor	Muenzel, Georg
Examiner Name	Vu, Tuan A.
Art Unit	2193
Attorney Docket No.	2000P07515US01 (1009-087)

METHOD OF PAYMENT (check all that apply)☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 50-2504 Deposit Account Name: Michael N. Haynes

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 20 or HP = 0	x	50	= 0			0
HP = highest number of total claims paid for, if greater than 20						
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
- 3 or HP = 0	x	200	= 0			
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 = 0	(round up to a whole number) x	250	= 0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Submission of IDS (after 1st OA)

Fees Paid (\$)

0

180

SUBMITTED BY

Signature	<i>Michael N. Haynes</i>	Registration No. (Attorney/Agent)	40,014	Telephone	434-972-9988
Name (Print/Type)	Michael N. Haynes	Date	24 Aug 2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



CERTIFICATE OF EXPRESS MAILING

Express Mail Mailing Label Number: EV 564482542 US

Date of Deposit: 24 August 2005

Pursuant to 37 C.F.R. § 1.10, I certify that I am personally depositing the following paper(s) or fee(s) with the "Express Mail Post Office to Addressee" service of the United States Postal Service on the above date in a sealed envelope (a) having the above-numbered Express Mail label and sufficient postage affixed, and (b) addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA, 22313-1450

Stamped, self-addressed postcard for USPTO receipt stamp (1 card)

Reply to Office Action dated 16 June 2005 (34 sheets)

PTO/SB/17 Fee Transmittal Form (1 sheet)

PTO-2038 Credit Card Payment Form (1 sheet)

Information Disclosure Statement (4 sheets)

Form PTO-1449 (1 sheet)

2 Non-Patent Literature documents

Application Number 09/822,300
Confirmation No.: 8037
Filing Date: 23 March 2001
Document Submission Date: 24 August 2005

Art Unit: 2193
Examiner: Vu, Tuan A.
Inventor: Muenzel, Georg
Docket: 2000P07515US01 (1009-087)

24 Aug 2005

Date

Eden Brown

Name of Certifier

Eden Brown

Signature of Certifier